PART B - FEE(S) TRANSMITTAL

SEP 1 2 2006

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents

P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

INSTRUCTIONS: The for appropriate. All function indicated transport for coted to maintenance fee notification	rm should be used for tran respondence including the below or directed otherwise	smitting the ISSU Patent, advance or in Block 1, by (a	JE FEE and rote of the specifying	PUBLICATION FEE (if re- ification of maintenance fees a new correspondence addre	quired). Blocks s will be mailed ss; and/or (b) in	I through 5 s to the current dicating a sep	should be completed where correspondence address as arate "FEE ADDRESS" for	
	E ADDRESS (Note: Use Block 1 for			Mata. A antificata	of mailing can a	nly he used fo	or domestic mailings of the	
KINNEY & LAN	LANGE BUILDING			SENT VIA EXP LABEL NO.:	RESS MA EV76004			
09/14/2006 WASFAW2 0	MN 55415-1002 0000024 10511787			Brian R.	Morris	on	(Depositor's name)	
01 FC:2501 02 FC:1504	700.00 OP 300.00 OP			25.4	2.72. 106		(Signature) (Date)	
APPLICATION NO.	FILING DATE	-	FIRST NAMED INVENTOR			ATTORNEY DOCKET NO. CONFIRMATION NO		
10/511,787	10/15/2004		Steven Sc	ott Crump	S697.12	2-0063	4806	
FITLE OF INVENTION: R	APID PROTOTYPE INJEC	TION MOLDING						
			•					
APPLN. TYPE	SMALL ENTITY	ISSUE F	EE	PUBLICATION FEE	TOTAL FEE(S) DUE		DATE DUE	
nonprovisional	YES	\$700		\$300	\$1000		09/19/2006	
EXAM	EXAMINER		IT	CLASS-SUBCLASS				
HUSON, MO		1732	, .	264-328100				
I. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. Kinney & Lange, P. A					
B. ASSIGNEE NAME AND	RESIDENCE DATA TO B	E PRINTED ON T	HE PATEN	(print or type)				
PLEASE NOTE: Unless recordation as set forth in	an assignee is identified be 37 CFR 3.11. Completion	low, no assignee of this form is NO	data will app F a substitute	ear on the patent. If an assignment.	gnee is identified	d below, the d	ocument has been filed for	
(A) NAME OF ASSIGN				ENCE: (CITY and STATE OR	•			
Stratasy	•	ries (will not be nr		Prairie, MN	, Comoration or o	ther private ar	oun entity	
la. The following fee(s) are	enclosed:	4b	Payment of A check		enclosed. 38 is attached.			
5. Change in Entity Status	(from status indicated above)		-11-2-16	·			
	MALL ENTITY status. See			ant is no longer claiming SM				
NOTE: The Issue Fee and P	is requested to apply the Issu ublication Fee (if required) words of the United States Pate	till not be accepted	1 from anvon-	ny) or to re-apply any previouse other than the applicant; a re	sly paid issue fe gistered attorney	to the applicate or agent; or the	ation identified above.	
Authorized Signature	3.42.7	<u>, </u>		Date	9/1	2/06		
Typed or printed name Brian R. Morrison				Registration	No. 58,4	55		

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

First Named

Inventor

Steven Scott Crump

Appln. No.

10/511,787

Filed

October 15, 2004

Title

RAPID PROTOTYPING INJECTION MOLDING

Docket No.

\$697.12-0063

Group Art Unit: 1732

Examiner: Monica A. Huson

EXPRESS MAIL COVER SHEET

Commissioner For Patents P.O. Box 1450 Alexandria, VA 22313-1450 SENT VIA EXPRESS MAIL

Express Mail No.:

(LENJEOO49074702)

The following papers are being transmitted via **EXPRESS MAIL** to the U.S. Patent and

Trademark Office on the date shown below:

- 1. Fee Transmittal (in duplicate) with attached check for \$1,000.00;
- 2. Part B Fee(s) Transmittal (in duplicate); and
- 3. "Fee Address" Indication Form.

Respectfully submitted,

KINNEY & LANGE, P.A.

Date: 9/12/06

 $\mathbf{B}\mathbf{y}_{\perp}$

Brian R. Morrison, Reg. No. 58,455

THE KINNEY & LANGE BUILDING

312 South Third Street

Minneapolis, MN 55415-1002

Telephone: (612) 339-1863

Fax: (612) 339-6580

BRM:kmm

OTPEFEE TRANSMITTAL
SEP 1 2 2006
A TRADEMINA CO.

Ļ

C	omplete if Known	
Application No.	10/511,787	
Filing Date	October 15, 2004	
First Named Inventor	Steven Scott Crump	
Group Art Unit	1732	
Examiner Name	Monica Anne Huson	
Atty. Docket Number	S697.12-0063	

METHOD OF PAYMENT (Check One) METHOD OF PAYMENT (Check One) MI The Commissioner is hereby authorized to charge any additional fuired under 37 C.F.R. 1.16 and 1.17 and credit any over payments posit Account No.11-0982. Deposit Account Name: Kinney & Language. A duplicate copy of this communication is enclosed.	ee 3. 7	Docke		FEE C	S697.12-0063 ALCULATION (Continued)					
X] The Commissioner is hereby authorized to charge any additional full uired under 37 C.F.R. 1.16 and 1.17 and credit any over payments posit Account No.11-0982. Deposit Account Name: Kinney & Lang	to ge, Lai	ADDITIO	ΙΔΙΛ		ALCULATION (Continued)					
uired under 37 C.F.R. 1.16 and 1.17 and credit any over payments posit Account <u>No.11-0982.</u> Deposit Account Name: Kinney & Lanç	to ge, Lai	ADDITIO	TNAL		FEE CALCULATION (Continued)					
uired under 37 C.F.R. 1.16 and 1.17 and credit any over payments posit Account <u>No.11-0982.</u> Deposit Account Name: Kinney & Lanç	to ge, Lai Fe)14AL I	3. ADDITIONAL FEES						
posit Account No.11-0982. Deposit Account Name: Kinney & Lang	ge, Lai	Entite	Cmall	Entity						
. A duplicate copy of this communication is enclosed.		rge Entity e Fee		Entity Fee	Fee Description	Fee paid				
			Code	(\$)	·					
	105	1 130	2051	65	Surcharge - Late filing fee or oath	-				
[X] Check Enclosed										
FEE CALCULATION	105	2 50	2052	25	Surcharge - late provisional filing fee or cover sheet	-				
	105	3 130	1053	130	Non-English specification	-				
BASIC FILING FEE										
FILING FEE SEARCH FEES EXAM FEES	181	2 2,520	1812	2,520	For Filing a Request for Reexamination	-				
n. Type FEE/SMALL FEE/SMALL FEES	125	1 120	2251	60	Extension for reply within first month					
	123	120	2231	00	Exclision to reply than the the	_				
ty 300./150 500/250 200/100 _	125	2 450	2252	225	Extension for reply within second month	-				
ign 200 / 100 100 / 50 130 / 65 _	125	3 1,020	2253	510	Extension for reply within third month	-				
ssue 300 / 150 500 / 250 600 / 300 _	125	4 1,590	2254	795	Extension for reply within fourth month	-				
visional 200 / 100 -0- / -00- / -0	125	5 2,160	2255	1,080	Extension for reply within fifth month					
Subtotal (1) \$	-0-	2 500	2402	250	Filing a brief in support of an appeal					
EXTRA CLAIM FEES					Donat for early proving					
Number Prior Extra Fee from Fee Paid Claims Below	140	3 1,000	2403	500	Request for oral hearing	-				
ai = _ X =	181	4 130	2814	65	Terminal Disclaimer Fee					
ер = _ X _ = _	145	52 50	2452	250	Petition to revive - unavoidable					
tiple Dependent Claims _ = _	145	3 1,50	0 2453	750	Petition to revive - unintentional					
ert 3 and 20, or number previously paid if greater; Reissue see	150	1,40	0 2501	700	Utility/Reissue issue fee	70				
ow arge Entity Small Entity	- 11			400	Design insure for					
Fee Fee Fee Description	150	02 80	0 2502	400	Design issue fee	•				
<u>de (\$) Code (\$)</u>	146	50 13	0 1460	130	Petitions to the Commissioner					
2 50 2202 25 Claims in excess of 20										
11 200 2201 100 Independent claims in excess of 3	180	07 5	1807	50	Petitions related to provisional applications	ě				
3 360 2203 180 Multiple Dependent Claim	180	06 18	0 1806	180	Submission of Information Disclosure					
14 200 2204 100 Reissue Independent Claims Over Original Patent					Statement					
over Original Faterit										
and over original patent	802	21 4	8021	40	Recording each patent assignment per property (times number of properties)					
APPLICATION SIZE FEE he specification and drawings exceed 100 sheets of paper, the					property (united fightines of properties)					
plication size fee due is \$250 (\$125 small) for each additional 50	180	D1	790 28	01 395	Request for Continued Examination	_				
eets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 C.F.R.					(RCE)					
16(s). <u>\$-0-</u>			, . E	Publicatio	n Fee	30				
Subtotal (2) \$	-0- Oth	ner tee (s _i	ecity) <u>F</u>	<u>Publication</u>						
Subtotal (2)	<u>~ </u>				Subtotal (3) \$	\$1,000.0				

Signature_	B-12 min	Reg. No		58,455
	Brian R. Morrison			
Date	9/12/06		Deposit Account No.	11-0982